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Group Art Unit: 2839
Examiner: Patel, T.

Atty. Ref.: FP02-348US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

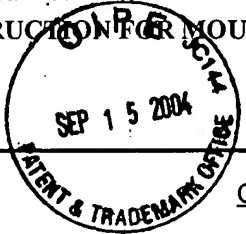
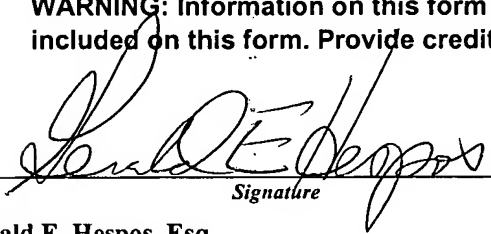
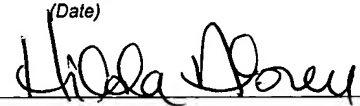
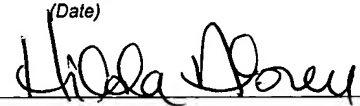
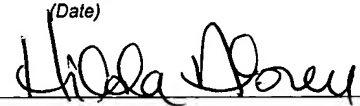
Applicant : Kazunori Yamashita
Appl. No. : 10/600,322
Filed : June 20, 2003
For : CONSTRUCTION FOR MOUNTING A TERMINAL, A CIRCUIT
BOARD CONNECTOR AND METHOD OF MOUNTING IT

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

This amendment is submitted in response to the Office Action of
June 22, 2004. Please amend the application as follows:

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. FP02-348US							
Applicant(s): Kazunori Yamashita											
Application No. 10/600,322	Filing Date June 23, 2003	Examiner Patel, T.	Customer No. 001218	Group Art Unit 2839	Confirmation No. 6172						
Invention: CONSTRUCTION FOR MOUNTING A TERMINAL, A CIRCUIT BOARD CONNECTOR AND METHOD OF MOUNTING IT											
 COMMISSIONER FOR PATENTS:											
Transmitted herewith is an amendment in the above-identified application.											
The fee has been calculated and is transmitted as shown below.											
CLAIMS AS AMENDED											
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE						
TOTAL CLAIMS	15 -	20 =	0 x	\$18.00	\$0.00						
INDEP. CLAIMS	3 -	3 =	0 x	\$86.00	\$0.00						
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00						
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 03-1030 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.											
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.											
 _____ Signature			Dated: September 13, 2004								
Gerald E. Hespos, Esq. Atty. Reg. No. 30,066 CASELLA & HESPOS LLP 274 Madison Avenue - Suite 1703 New York, NY 10016 Tel. (212) 725-2450 Fax (212) 725-2452			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <u>September 13, 2004</u>.</td> </tr> <tr> <td style="text-align: center;">(Date)</td> <td style="text-align: center;">  _____ Signature of Person Mailing Correspondence </td> </tr> <tr> <td colspan="2" style="text-align: center;"> Hilda A. Abreu _____ Typed or Printed Name of Person Mailing Correspondence </td> </tr> </table>			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <u>September 13, 2004</u> .		(Date)	 _____ Signature of Person Mailing Correspondence	Hilda A. Abreu _____ Typed or Printed Name of Person Mailing Correspondence	
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(Date)	 _____ Signature of Person Mailing Correspondence										
Hilda A. Abreu _____ Typed or Printed Name of Person Mailing Correspondence											
CC:											